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Attorney Docket No.

First Inventor

Under the Paperwork Reduction Act of 1995,

UTILITY **PATENT APPLICATION TRANSMITTAL**

Title	

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			APPLICA	TION ELEI	MENTS		ADD	RESS TO:	Assistant Cor Box Patent A		oner for Paten ion	<u> </u>
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۱	2.	V	Applicant claims s See 37 CFR 1.27.		tus.	7		cleotide and/or Ami	no Acid Sequ		ubmission	
ı	3.	v	Specification (preferred arrangement	t set forth below)	I Pages 8]]	a. [Computer Rea	• /	CRF)		
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25	5.	Oath o	r Declaration	I	Total Pages 2	!]	12.	Information Di Statement (ID			Citations	3
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,			1.63(d)(2)	and 1.33(b).			"	(b)(2)(B)(i). Applicant must attach form PTO/SB/35				
	6.	~	Application Data	Sheet. See 3	7 CFR 1.76		or its equivalent.					
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	Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Or Correspondence address below Name Gary John Corey											
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ŀ		21445 Bundy Canyon Road										
-	Address											
	City Wildomar		r		State	California	Zip (Code	92595			
	Со	untry		USA		Tel	ephone	909-674-810)0 Fa	ЭX	909-674-31	10
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PTO/SB/17 (10-01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

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METHOD OF PAYMENT	FEE CALCULATION (continued)			
1. The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
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2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional			
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Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)	40.00		
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))			
104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be			
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 740 279 370 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 140.00	Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 73	30.00		

SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Gary John Corey	Registration No. (Attorney/Agent)	Telephone	(909) 674-8100	
Signature	Ham John Con	en.	Date	01/11/2002	

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